

DO/ED BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 508028 RECEIPT DATE: 03 / 06 / 00  
IA NUMBER: PCT/ US98 / 11721 IA FILING DATE: 06 / 05 / 98  
FAMILY NAME: CHAPMAN DELAY WAIVED (Y/N): Y  
GIVEN NAME: GRAHAM M DEMAND RECEIVED (Y/N): N  
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 06 / 05 / 97  
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N  
ATTORNEY DOCKET NUMBER: PET 43 US COUNTRY:  
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 0000000 TELEPHONE 0000000000  
FAX  
NAME: JOHN A WATERS  
WATERS & MORSE  
STREET: 125 OTTAWA AVENUE NW  
SUITE 400  
CITY: GRAND RAPIDS  
STATE/COUNTRY: MI ZIP: 49503  
EMAIL:  
APPLICATION TITLES:  
PLASTIC MASKING COVER

TAB TO LAST POSITION, PUSH SEND